

APPLICATION DATA SHEET**Application Information**

Application Number::

Filing Date::

Application Type:: Regular

Subject Matter:: Utility

Suggested Classification::

Suggested Group Art Unit::

CD-ROM or CD-R?::

Number of CD Disks::

Number of Copies of CDs::

Sequence Submission?::

Computer Readable Form (CRF)?::

Number of Copies of CRF::

Title:: INTERMETALLIC MATERIAL AND USE OF THIS MATERIAL

Attorney Docket Number:: 033275-444

Request for Early Publication?:: No

Request for Non-Publication?:: No

Suggested Drawing Figure::

Total Drawing Sheets:: 4

Small Entity?:: No

Latin Name::

Variety Denomination Name::

Petition Included?:: No

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers::

Secrecy Order in Parent Appl.?:: No

Applicant Information

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Switzerland

Status:: Full Capacity

Given Name:: Andreas

Middle Name::

Family Name:: Kunzler

Name Suffix::

City of Residence:: Baden

State or Province of Residence::

Country of Residence:: Switzerland

Street of Mailing Address:: Felsenstrasse 6

City of Mailing Address:: Baden

State or Province of Mailing Address::

Country of Mailing Address:: Switzerland
Postal or Zip Code of Mailing Address:: CH-5400

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Switzerland
Status:: Full Capacity
Given Name:: Mohamed
Middle Name::
Family Name:: Nazmy
Name Suffix::
City of Residence:: Fislisbach
State or Province of Residence::
Country of Residence:: Switzerland
Street of Mailing Address:: Zelglistrasse 30
City of Mailing Address:: Fislisbach
State or Province of Mailing Address::
Country of Mailing Address:: Switzerland
Postal or Zip Code of Mailing Address:: CH-5442

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Switzerland
Status:: Full Capacity

Given Name:: Markus
Middle Name:: E.
Family Name:: Staubli
Name Suffix::
City of Residence:: Dottikon
State or Province of Residence::
Country of Residence:: Switzerland
Street of Mailing Address:: Haushalte 9
City of Mailing Address:: Dottikon
State or Province of Mailing Address::
Country of Mailing Address:: Switzerland
Postal or Zip Code of Mailing Address:: CH-5605

Correspondence Information

Correspondence Customer Number:: 21839
Phone Number:: (703) 836-6620
Fax Number:: (703) 836-2021

Representative Information

Representative Customer Number:: 21839

Domestic Priority Information

Application::	Continuity Type::	Parent Application:: Parent Filing Date::
This Application	National Stage of	PCT/CH2003/000503 07/24/03

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::
Switzerland	2002 1406/02	08/16/02	Yes

Assignee Information

Assignee Name::	ALSTOM Technology Ltd.
Street of Mailing Address::	Brown Boveri Strasse 7
City of Mailing Address::	Baden
State or Province of Mailing Address::	
Country of Mailing Address::	Switzerland
Postal or Zip Code of Mailing Address::	CH-5400